



**EMERGENCY CUSTODY ORDER
AFFIDAVIT**

Case No. _____
Court ☐ District ☐ Family
County _____
Division _____

IN THE INTEREST OF: _____, A CHILD

Birthdate	Sex	Race	SSN

I, _____, swear or affirm under oath the following statements are true to the best of my knowledge *(if more space is needed, attach second page)*:

Date: _____, 2____ Affiant's Signature: _____

Affiant's Name (Print/Type): _____

Address: _____

Relation to Child: _____ Phone No. _____

Child currently resides with: _____

Relation to Child: _____

Juvenile's Legal Mother: _____

Address: _____

Phone No. _____ SSN _____ Legal Custodian? ☐ Yes ☐ No

Name of Other(s) Living in Home and Relationship to Child:

☐ Stepfather _____

☐ Sibling(s) _____

☐ Other _____

Case No. _____

Juvenile's Legal Father: _____

Address: _____

Phone No. _____ SSN _____ Legal Custodian? ☐ Yes ☐ No

Name of Other(s) Living in Home and Relationship to Child:

☐ Stepmother _____

☐ Sibling(s) _____

☐ Other _____

Subscribed and sworn to before me on _____, 2_____. My Commission expires: _____

_____, 2_____. _____, Clerk

By: _____ D.C.